

# COUNTY OF LOS ANGELES

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## DEPARTMENT OF MENTAL HEALTH

<http://dmh.lacounty.gov>

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

August 6, 2008

TO: Each Supervisor

FROM: Marvin J. Southard, D.S.W.  
Director of Mental Health

SUBJECT: **WAITING LISTS FOR CHILDREN'S MENTAL HEALTH SERVICES**

At the Board of Supervisors' meeting on July 29, 2008, a report was requested regarding waiting lists that may exist for children's mental health services in Department of Mental Health (DMH) directly-operated programs and contract agencies. The attached summary provides you with waiting list information for each provider that responded to our request. Additional explanatory information is attached in a separate document.

It is important to stress that there are no waiting lists for child mental health emergencies or urgent visits. All directly-operated programs have the capacity to provide initial screening at the time children/families present for care. The Department requires all contract providers to make provision for screening and assessing those in need of urgent mental health care at the time they contact the agency. Some examples of mental health emergencies or urgent situations for children include:

- recent discharge from a psychiatric hospital
- potential danger to self due to thoughts about suicide or self-injury – or behaviors that may result in harm
- risk of danger to others as a result of mental health conditions.

In such situations, children are assessed or triaged within 24-48 hours.

While many the providers report having waiting lists for routine mental health services, a number of providers indicated that they do not have any wait for children and families that wish to be seen (please see attached). Of the 61 providers responding to the DMH request for information:

- 29 (47.5%) reported no waiting list for English-speaking children and families
- 31 (50.8%) reported no waiting list for monolingual Spanish-speaking children and families

Of the agencies that report having a waiting list, the median number of children waiting to be seen is 14 for English language therapists and 5 for Spanish-language therapists. It should be noted that this is often a reflection of agencies' recruitment efforts: hiring one therapist can clear a waiting list of 20-35 families waiting to be seen.

There are a number of factors that affect waiting lists and providers engage in various strategies for addressing access to care. These include:

- **Family preferences for appointment times.** Families may need to wait longer for services provided after school, after parents'/caregivers' work day or on weekends.
- **Time of year.** Many agencies serve as training sites for graduate interns and may develop waiting lists – particularly during August prior to the arrival of interns. Such seasonal waiting lists are typically cleared during September.
- **Agency practices regarding access to care.** Several providers informed DMH that they regularly refer out to other agencies if they cannot immediately accept a client so that the child receives services quickly; these providers do not maintain waiting lists. Other agencies prioritize access to their specialized programs so that they are able to "fast track" high-need clients into intensive treatment. For these providers, clients who require less urgent care may encounter a wait to be seen.
- **Availability of bilingual staff.** For those agencies that have waiting lists for routine services, the estimated length to wait ranges from 1 week to 20 weeks. The length of time to wait for services is in some cases longer for services in Spanish than in English

Both DMH and providers attempt to build a variety of safeguards into the system. These include:

- Agencies regularly instruct parents or caregivers on the importance of contacting the provider should the child's symptoms or situation worsen.
- Some providers make regular calls to families on a waiting list. During the follow-up calls, they assess risk and check on whether the family wishes to remain on a waiting list or receive a referral to another provider.
- DMH systems navigators regularly monitor the capacity of providers and work with families to ensure successful linkage with services.

I hope this information will prove helpful. Please do not hesitate to contact me at (213) 738-4601 if you have any questions, or your staff may contact Robin Kay, Ph.D., Acting Chief Deputy Director, at (213) 738-4108,.

MJS:OC:bjm

Attachments

c: Sachi A. Hamai, Executive Officer, Board of Supervisors  
Sheila Shima, Deputy CEO



**LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH  
CHILDREN'S WAITING LIST SURVEY – OUTPATIENT SERVICES  
COMMENTS - JULY 30, 2008 REQUEST**

**Amanecer Community Counseling Service**

- Our average length of wait for all children is between 4 and 5 months (up from 3 months just recently). However, if a child is a hospital discharge, or with suicidal ideations or tendencies, we will IMMEDIATELY place them in one of our intensive programs for stabilization and NOT have them go onto the waiting list.

**Almanson Center**

- For client referrals that present serious self-harm, harm to others symptoms, or have been discharged from a Psychiatric Hospital, we make phone contact within 24 hours (of our regular work week of Monday-Friday 8-5) to schedule an intake and address any critical risk factors that may present themselves, with the initial phone contact.
- For Almanson's only, 7 days a week/24 hours a day services available, FSP child program, our staff responds within 24 hours including weekends, to new referrals and existing FSP clients.

**Bienvenidos**

- We effortlessly triages all crisis/urgent referrals and will get client in for an evaluation within 1-2 days.
- Bienvenidos has staffed 6 bilingual clinicians in the past 6 months to serve our monolingual clients and families, and continue to staff more bilingual clinicians.
- Currently our intake coordinator remains in frequent contact with non-urgent families on our wait list for updates or referrals in case they need immediate access to services.

**Child and Family Center**

- Cases are assigned based on severity of presenting problems and situation, regardless of language spoken by client or family.
- Hospital release cases, AB3632 cases, and other cases needing to be assigned promptly are also assigned.
- Protocols are developed and followed to regularly follow up on those who have been on the waiting list for a number of weeks in order to determine any increase in severity, development of any acute problems, and/or continued need for and interest in services.
- Simultaneously, all cases are reviewed regularly by a team of clinicians to determine appropriateness of treatment plan and services, and to determine continuing need for services or appropriateness of termination planning to allow for assignment of a new case from the waiting list.
- Size of caseload per therapist is continually re-examined based on severity of clients' issues and need for multiple sessions per week (e.g. individual and family).
- In addition, every effort is made to fill open positions promptly to maximize available openings for new cases.

### **Child & Family Guidance Center**

- For all sites, we triage the screenings so that any case that is experiencing a crisis, or is a hospital release, or is referred by Valley Coordinated Child Services we typically see within 24 to 48 hours.
- FSC - In some cases the length of time waiting is contingent upon receiving a minute order for treatment (if the child is a ward of the Court) or we are awaiting consent from a parent (in divorce cases where parents share custody).
- LAN - The long wait time for the Spanish speaking children here is partially due to the lack of Spanish speaking staff at this site. Families are given the option of being seen at our Palmdale facility and/or are referred to other agencies. They may even be on wait lists at other facilities as well. Most of these clients have chosen to wait for an opening at the Lancaster site rather than being seen at our Palmdale facility.
- NR - We are a bit understaffed at present.

### **Community Family Guidance Center**

- As of today, none of our intensive programs, STARS, CSOC and FSP, have any children waiting to be assigned.
- As indicated in the July 29, 2008 communication regarding most outpatient providers, Community Family Guidance Center has a triage system for the most urgent and severe cases. These cases can be seen immediately, either through one of our intensive programs, STARS, CSOC and FSP, or through one of our non-intensive programs. In addition, special attention is given to DCFS children who qualify for the Specialized Foster Care program, and to AB3632 children. These referrals are assigned as soon as possible.
- For those children and adolescents not requiring immediate services, waiting times vary. Most often this is due to the family's availability. Families with flexible schedules and especially families who are able to attend services during the morning and early afternoon hours are often seen within a few days to a week. Families with more restricted availability, especially those families requesting appointments 4 pm and later, may have to wait longer. For families that the agency is not able to see in a short amount of time, referrals to other agencies are offered. The agency has found that even though referrals are offered, many families prefer to wait until the agency has an opening at the time the requested, even if this extends their waiting period.
- Regarding the question of bi-lingual (Spanish speaking) capability that was also noted in the same July 29, 2008 communication, Community Family Guidance Center has made a concerted effort to increase our bilingual staff. We currently have four bilingual (Spanish-speaking) case managers and recently hired four new bilingual (Spanish-speaking) therapists, bringing our total number of bilingual therapists to ten. In addition, we have therapists who are bilingual in other languages, such as Russian and Armenian.

### **Counseling4Kids**

- For SA 2, 4 of the 21 English-speaking children are actually bilingual English/Spanish-speaking children. 2 of the 4 have monolingual Spanish-speaking caregivers who will participate in treatment. Therefore, we counted those 2 as monolingual Spanish-speaking children. For SA 6, 23 children are bilingual with monolingual caregivers, so they were counted as monolingual Spanish speaking children. 1 child was monolingual Spanish speaking, making the total 24.



- "Crisis" cases, including clients just released from psychiatric hospitalization, suicidal clients (our intake form asks the referring party to report suicidal behavior/ideation, and if this is on the referral form we phone the referring party immediately), and clients who engage in "cutting" are assigned within 1-2 days of the referral. If we do not have availability to see these clients immediately, we link the client to an agency who can be working directly with the CSW or caregiver.

### **Enki**

- \*Duplicate count - this includes 6 English speaking clients and 3 monolingual Spanish speaking clients that were included in the total number of children on the waiting list.

### **Gateways Adolescent O/P**

- Current policy for attending to referrals is to call caregiver within 48 hours of receipt to determine severity of symptoms and availability for treatment. Client is either scheduled for intake or caregiver is informed of wait list. In the event client cannot be seen within 3-4 weeks or immediately if required, referrals are made to another agency that can meet the need of the client. GCAOP has just hired 2 more providers which should substantially diminish both current wait list and length of time from referral to service.

### **Glen Roberts CSC School-Based MH**

- Currently we have no waiting list.
- Generally speaking, our Spanish speaking therapists treat families whose parents speak Spanish and necessitate a therapist that speaks Spanish. However, the children usually speak English.
- There are times when we have a waiting list and it is more difficult to staff cases that require a Spanish speaking therapist because of our limited number of bilingual therapists.

### **Hathaway-Sycamores Lancaster Outpatient**

- At the time of the phone screen, caregivers are given an estimated length of time until their child will be seen.
- All caregivers are provided with other agency names and numbers, and are requested to call the clinic and report any worsening of symptoms/behaviors.
- Crisis calls (hospital discharges, recent suicidal ideation, psychotic symptoms, etc.) are seen within 24 hours. All other clients are seen in the order of the call. New Program as of 6/17/08. SA 1 District Chief, JoEllen Perkins, is aware of our wait list due to new program and not fully staffed as yet.

### **Intercommunity Child Guidance Center**

- The Service Coordination Unit (SCU) an on-site treatment team that consists of a program director, therapists, and case managers are on call 5 days a week for telephone screening/triage and/or walk-in screening/triage.
- A Request for Service Form completed via telephone and/or face-to-face to obtain information on problems/concerns and to determine that child meets medical criteria for services.
- All children and their families who meet medical criteria will be directed to participate in the assessment process with a master on Ph.D. level therapist. Children and families who do not qualify for intensive treatment services will be redirected to other non DMH internal services offered by ICGC, i.e., parenting education, short-term treatment, short-



term crisis intervention services, and/or referred to community based resource that is more suitable to meet the needs of child and family.

- The SCU will coordinate the assessment and ensure that the child and family are fully engaged in the treatment process.
- Upon completion of a Comprehensive Psychosocial Assessment, the case assignment will be completed within 72 hours; however, high risk cases are assigned the same day.
- Discharges from hospitals, residential treatment programs, and/or urgent care centers will participate in a Comprehensive Psychosocial Assessment and assignment within 24 hours of discharge.

### **Los Angeles Child Guidance Clinic**

- The Clinic operates a Walk-in Clinic that opens cases the day of the walk-in or within one week for all children ages 6 to 22. For our 0 to 5 services, there can be a small wait list due to high demand for Clinic services.
- All 0 to 5 children are initially screened regarding risk and if determined to be high risk are immediately opened and not placed on wait list. When services are not immediately available for non high risk 0 to 5 children, parents/caregivers are offered external referrals to another provider. For the 0 to 5 children that are on the above wait list, the parents/caregivers chose to wait for services rather than accept an external referral. Each family on this wait list is called at least monthly to check on their status including ongoing risk assessment as well as desire to remain waiting rather than receiving a referral.
- The Clinic has worked with the SA 6 Co-located DMH staff to allow a specialized port of entry for foster children of all ages (including 0 to 5) via faxed referral or Walk-in to expedite services with intakes being offered in the home and with no wait list even for Spanish speaking families.

### **PROTOTYPES ICAN**

- Currently has no wait list for children. Intakes are scheduled the week of contacting the agency or depending on the client's availability. Emergent cases can be seen the same day or the following day if determined to be clinically necessary.

### **SHIELDS For Families**

- It is our general rule of practice not to keep any waiting list for services. If we are unable to staff a case immediately we will refer out. If a client presents with urgent, severe symptoms that warrant immediate services, we will make accommodations within one of our programs for the client to be seen immediately.

### **School MH 97th Street Clinic**

- Indigent status is unknown because all children are served regardless of ability to pay. All referrals are triaged for "high-risk" by the Team Leader and referred or assigned immediately.
- WL is higher during July/August due to summer hiatus of student/schools.

### **Special Service for Groups-APCTC**

- SA 8 client is receiving mental health services through DCFS and was just referred to SSG-OTTP for the music group. The current group is just now graduating and will be starting up again in early September 2008.

### **The Village Family Services**

- We have bilingual Spanish speaking therapists available and no waiting list.

### **Tobinworld**

- \*We are located in SA 2, but because we are a non-public school and bus in children throughout the county, we are a county-wide provider. While we do provide some in-home services on a case-by-case basis, we do not provide significant in-home services of SA 2.
- \*\*We do not provide indigent services.
- \*\*\*We do not currently have a waiting list, though because we are a small provider, the time from the referral to the date of the initial assessment may be up to 7 days. Urgent cases are seen within one day or an appropriate referral will be made.

**LOS ANGELES COUNTY - DEPARTMENT OF MENTAL HEALTH  
CHILDREN'S WAITING LIST SURVEY - OUTPATIENT SERVICES**

**REQUESTED - 7/30/2008**

AGENCY NAME	SUP. DISTRICT	SERVICE AREA	NUMBER OF ENGLISH SPEAKING CHILDREN ON THE WAITING LIST	NUMBER OF MONOLINGUAL SPANISH SPEAKING CHILDREN ON THE WAITING LIST	NUMBER OF CHILDREN WITH NO PAYOR SOURCE ON THE WAITING LIST	LENGTH OF TIME OF THE WAIT LIST FOR ENGLISH SPEAKING CHILDREN	LENGTH OF TIME OF THE WAIT LIST FOR MONOLINGUAL SPANISH SPEAKING CHILDREN	LENGTH OF TIME OF THE WAIT LIST FOR CHILDREN WITH NO PAYOR SOURCE
Amanecer Community Counseling Center	1 & 2	4	15 to 16	5 to 6	0	N/A	N/A	N/A
Almansor Center	5 & 1	3 & 7	0	0	0	N/A	N/A	N/A
Augustus F. Hawkins	2	6	0	0	0	N/A	N/A	N/A
Bienvenidos	1 & 5	3	13	3	0	2 to 6 weeks	2 to 6 weeks	N/A
Bienvenidos	1 & 4	7	45	6	0	3 to 6 weeks	3 to 6 weeks	N/A
Child & Family Center	5	2	55	13	1	Up to 6 months	Up to 8 months	Up to 3 months
Child & Family Guidance Family Stress Site (FSC)	3	2	14	0	0	5 weeks	N/A	N/A
Child & Family Guidance Lancaster (LAN)	5	1	27	1	0	12 weeks	20 weeks	N/A
Child & Family Guidance Northridge Site (NR)	3	2	33	18	0	12 weeks	16 weeks	N/A
Child & Family Guidance Palmdale (PAL)	5	1	36	16	0	8 weeks	8 weeks	N/A
Child & Family Guidance Van Nuys Site (VN)	3	2	0	2	0	N/A	4 weeks	N/A
Community Family Guidance Center	4	7	74	36	0	N/A	N/A	N/A
Counseling4Kids	5	6	9	24	0	3 to 6 weeks	4 to 8 weeks	N/A
Counseling4Kids	2	2	21	2	0	3 to 6 weeks	3 to 6 weeks	N/A
David & Margaret	5	3	0	0	0	N/A	N/A	N/A
Didi Hirsch CMHCInglewood Site	2	8	9	0	3	2 weeks	None	2 weeks
Didi Hirsch CMHC Mar Vista Site	2	5	0	3	0	None	3 weeks	N/A
Didi Hirsch CMHCMetro Site	2	4	1	5	0	2 weeks	2 Weeks	N/A
Didi Hirsch CMHCTaper Site	2	6	0	1	0	None	2 Weeks	N/A



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Dubnoff Center	3	2	0	0	0	N/A	N/A	N/A
D'Veal	5	3	0	0	0	N/A	N/A	N/A
Edeleman	3	5	0	0	0	N/A	N/A	N/A
El Centro de Amistad, INC (7050)	3	2	0	0	0	N/A	N/A	N/A
El Centro de Amistad, INC (7371)	3	2	3	5	0	1 month or less	1 to 2 months	N/A
EMQ/Hollygrove	3	4	3	3	0	1 to 4 weeks	1 to 5 months	N/A
Enki Boyle Heights Y&FS	1	4	0	0	0	N/A	N/A	N/A
Enki Covina Y&FS	5	3	6	2	0	2 months	2 months	2 months
Enki East L.A. Y&FS	1	7	62	17	9* (duplicate)	3 to 4 months	3 to 4 months	3 to 4 months
Enki El Monte Y&FS	1	3	5	2	0	1 month	1 month	1 month
Gateways Adolescent O/P	2	4	25	1	7	3 weeks	4 weeks	3 weeks
Glen Roberts CSC	2	2	0	0	0	N/A	N/A	N/A
Glen Roberts School Based MHS	2	2	0	0	0	N/A	N/A	N/A
Harbor UCLA	4	8	0	0	0	N/A	N/A	N/A
Hathaway - Sycamores Commerce 7670	1	7	0	0	0	N/A	N/A	N/A
Hathaway-Sycamores, Lancaster Outpatient	3	1	26	4	0	3 to 4 months	3 to 4 months	N/A
Hillside	1 & 5	3	30	20	15	1 month	2 months	2 months
Intercommunity Child Guidance Center	1 & 4	7	25	20	0	4 weeks	8 weeks	N/A
LAUSD School MH 97th Street Clinic	1 & 2	2	175	0	0	3 to 4 months	N/A	N/A
LAUSD School MH 97th Street Clinic	7 & 8	6	27	2	0	1 to 2 months	N/A	N/A
LAUSD School MH 97th Street Clinic	5 & 6	4 & 7	10	30	0	3 to 4 months	N/A	N/A
Long Beach Child & Adolescent	4	8	0	0	0	N/A	N/A	N/A
Los Angeles Child Guidance Clinic	2	6	3	17	0	1 month	2 months	N/A
Pacific Clinics	1,4,5	2,3,4,6,7,8	0	0	0	N/A	N/A	N/A

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PROTOTYPES I-CAN Pasadena	5	3	0	0	0	N/A	N/A	N/A
PROTOTYPES I-CAN El Monte	5	3	0	0	0	N/A	N/A	N/A
PROTOTYPES I-CAN Pomona	1	3	0	0	0	N/A	N/A	N/A
Providence Community Services	1 & 4	7	0	0	0	N/A	N/A	N/A
Roybal	1	7	60	0	60	1 month	2-3 months	N/A
San Antonio	1	7	0	0	0	N/A	N/A	N/A
San Fernando MHC CHILD	5	2	3	11	5	1-2 months	1-2 months	1-2 months
Serenity (FFA)	5	3	0	0	0	N/A	N/A	N/A
SHIELDS For Families	2	6	0	0	0	N/A	N/A	N/A
Special Service for Groups-APCTC	3	2	0	0	0	N/A	N/A	N/A
Special Service for Groups-APCTC	2	4	2	9	0	N/A	1 to 4 months	N/A
Special Service for Groups-HOP	2	6	0	0	0	N/A	N/A	N/A
Special Service for Groups-APCTC	4	7	0	0	0	N/A	N/A	N/A
Special Service for Groups-OTTP	4	8	1	0	0	1 day	N/A	N/A
The Los Angeles Free Clinic dba The Saban Free Clinic	3	4	5	4	0	2 to 3 weeks less if emergency	2 to 3 weeks less if emergency	N/A
The Village Family Services	3	2	1	1	0	7 to 10 days	7 to 10 days	N/A
Tobinworld	5	2*	0	0	N/A**	0 to 7 days***	0 to 7 days	N/A
Valley Coordinated Services	3	2	0	0	0	N/A	N/A	N/A